2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004134

Address: City-St-Zip:

MIRAMAR, FL 33023

Entity Name: A BRIGHTER FUTURE, INC.

FILED Mar 02, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 511 NW 4TH STREET MIAMI, FL 33127 **Current Mailing Address: New Mailing Address:** 511 NW 4TH STREET MIAMI, FL 33127 FEI Number: 68-0554069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARGROW, LYNN SR. 511 NW 4TH STREET MIAMI, FL 33127 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HARGROW, LYNN SR. Name: Name: Address: 411 NE 108TH STREET Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: () Delete Title: () Change () Addition NICHSON, DORETHA SR. Name: Name: Address: 2190 NW 135TH STREET Address: City-St-Zip: MIAMI, FL 33167 City-St-Zip: Title: () Delete Title: () Change () Addition EVANS, LAMAR Name: Name: 511 NW 4TH STREET Address: Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TUCKER, WALTER Name: 17935 NW 19TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: Title: () Delete () Change () Addition HENDERSON, KAREN Name: Name: 7637 HARBOUR BLVD. Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LYNN HARGROW, SR. D 03/02/2004